

PART B - FEE(S) TRANSMITTAL

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7590 03/22/2010

Susan M. Donahue
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via
EFS

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Susan M. Donahue	(Depositor's name)
<i>Susan M. Donahue</i>	
(Signature)	
June 15, 2010	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/771,583	02/04/2004	Kenwood Hall	03AB072/ALBRP330US	3801

TITLE OF INVENTION: SYSTEMS AND METHODS THAT UTILIZE A STANDARD DATABASE INTERFACE TO ACCESS DATA WITHIN AN INDUSTRIAL DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$0	\$0	\$1510	06/22/2010
EXAMINER	ART UNIT	CLASS-SUBCLASS				
ahn, sangwoo	2168	707-756000				

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

- 1 Turocy & Watson LLP
2 R. Scott Speroff
3 John M. Miller

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ROCKWELL AUTOMATION TECHNOLOGIES, INC. MAYFIELD HEIGHTS, OHIO U.S.A.

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

- Issue Fee
 Publication Fee (No small entity discount permitted)
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number **01-0857** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature



Date **June 14, 2010**

Typed or printed name **John M. Miller**

Registration No. **38,560**

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